

INFORMATION PAPER

27 May 2008

SUBJECT: Army Chaplaincy – Pastoral Care and Religious Support with Regards to Behavioral Health and Suicide Prevention

1. PURPOSE: To provide general information regarding efforts by the Army Chaplaincy to provide effective religious support and pastoral care to Soldiers in the context of behavioral health care, with an emphasis on suicide prevention.

2. OVERVIEW: U.S. Army chaplains and chaplain assistants form the UMT (Unit Ministry Team) and are fully integrated in the care and support of Soldiers and Families. They address the spiritual dimension of a Soldier's life by providing religious support, in the form of worship services, rites and sacraments, religious education, prayer, and scripture study to enhance the well-being of members of the command, providing a foundation for coping skills and resiliency skills. Additionally, they provide pastoral care and counseling in routine and crisis situations, to include those periods in which a Soldier may find himself or herself facing behavioral health issues. Chaplains are often part of multi-disciplinary teams (social work, behavioral health, medical) that complete a holistic approach to Soldier care by addressing the spiritual or religious dimensions of an issue.

3. KEY POINTS:

a. Preventive and Responsive Measures

1) Relationship enhancement: The majority of Soldiers experiencing suicidal thoughts are experiencing relationship or life choice difficulties. Consequently, the Army conducts training for Soldiers as an important suicide prevention tool. The *Strong Bonds: Building Ready Families* program is the Chief of Chaplains' initiative designed to give Soldiers and their Families the skills and attitudes necessary to build solid relationships, marriages and families. *Strong Bonds* events are led by unit chaplains who have been trained in various, evidence-based core curricula that address single, couple, and family relationships issues. The retreats provide a safe, secure environment to learn relationship skills and develop strategies to address the impact of repeated deployments, resiliency, and conflict. Modules are continually being revised and developed to address changing needs, including the needs of single soldiers. In 2008, we anticipate that more than 65,000 Soldiers and Families will participate in one of 1,600 events aimed at strengthening relationships.

2) Training: Chaplains routinely conduct training for Soldiers and leaders in suicide awareness, prevention and intervention. Often, they are involved in training other topics that lead to a more balanced and healthy life, focusing on those choices a Soldier makes that will enhance their ability to adapt to life situations.

3) Pastoral care and counseling: Chaplains are often first person to whom a Soldier will turn when seeking assistance. They are available to Soldiers for counsel in their work place, in their home or barracks, in the training environment and on the battlefield. In the course of counseling, chaplains may be able to divert a potentially suicide crisis by helping the Soldier to see alternatives to death, find appropriate help in working through behavioral health issues, and developing a supportive network among peers and loved ones. Chaplains also help those who have experienced loss, such as family or the unit, by providing memorial services, critical incident debriefings (often in conjunction with behavioral health teams), and counsel. Each installation has a chaplain on call to respond to crisis outside of duty hours, so a chaplain is available 24/7.

b. Future efforts: Chaplains and chaplain assistants will continue to remain proactive in providing training in suicide awareness, prevention, intervention and post-vention (actions after a suicide). We will adapt training based on research and lessons learned to offer the best possible tools to Soldiers and leaders to encourage increased coping and resiliency skills. Chaplains will partner with the behavioral health community to emphasize the importance of peer support – “battle buddies” – in recognizing and intervening in advance of a Soldier’s decision to view suicide as an option. All areas of chaplain and chaplain assistant training (Basic Officers’ Course, Career Course, Basic NCO Course, local training, etc.) will continue to build skills necessary to effectively address life choices that contribute the consideration of suicide as a permanent solution to a temporary problem.

4. SUMMARY: Chaplains are inherently linked with efforts by command and support agencies to ensure the health and well-being of Soldiers and Families. They routinely address the spiritual dimension of that well-being through life skills and relationship enhancement training, as well as addressing it through personal pastoral care and counseling in crisis situations. Chaplains are the primary trainers of suicide awareness, prevention, and intervention; they will continue in their efforts to encourage all Soldiers of the responsibility to stand shoulder to shoulder with their battle buddies in ensuring the health of the force.